

Name: Tennant Natalie

Return completed form to:
WV Ethics Commission
210 Brooks St., Ste 300
Charleston WV 25301
304-558-0664 or 1-866-558-0664



Candidate information, if applicable

County : _____

Candidate for: _____

Date you filed for candidacy: _____

District or circuit if applicable _____

West Virginia Ethics Commission Financial Disclosure Statement

W. Va. Code §§ 6B-2-6 and 7

Rev: 11-2012

Important!

- Please read and answer **every question**. We will return incomplete forms to you for completion or correction.
- You must file a new Financial Disclosure Statement each year you hold or run for a public position.
- If this is your annual filing, the statement is due by February 1.
- If you are a new appointee, this statement is due within 30 days of the date of your appointment.
- If you are a candidate for public office, this statement is due within 10 days of filing your *Certificate of Candidacy*.
- The information you provide on this statement should cover the past calendar year.
- You may attach additional pages to this form if necessary.

1. Name of filer and spouse

Filer last name Tennant First name Natalie
Spouse last name Wells First name Erik
County of residence Kanawha
Business (employment) address 1900 Kanawha Blvd. East
Building 1, Suite 157-K
City / state / zip Charleston, WV 25305

2014 FEB -3 PM 3:07
RECEIVED
WV ETHICS COMMISSION

2. Elective Office

Do you currently hold a county, circuit or state elected office? Yes ☒ No ☐

If yes, title of office: Secretary of State

Are you a candidate, or do you plan to become a candidate for public office in the next election? N/A ☐ Yes ☒ No ☐

If yes, for what office: United States Senate Date you filed for candidacy January 24, 2014

3. Positions on State Boards, Commissions or Agencies

List all State Boards, Commissions or Agencies on which you now serve or have served in the past 12 months, by appointment of the Governor. Include recent appointments. ☐ Mark here if N/A

Name: TennantNatalie**4. Business Names**

List all names under which you and/or your spouse conduct or do business. If you or your spouse is self-employed, list the name or names under which you or your spouse conducts the business, trade, sole proprietorship or profession.

☐ Mark here if no business names to report

self ☒ spouse ☐ Wells Media Group LLC

Role is limited to that of co-owner

self ☐ spouse ☐

self ☐ spouse ☐

5. Employment

For you and your spouse, list the name and address of each employer(s) during the preceding calendar year. Include all employment with city, county or state government as well as employment in the private sector. Provide your job title and a general description of your job duties. For purposes of this question, an employer is one who provides you with a W-2 Form. This does not include self-employment if listed elsewhere on the form.

☐ Mark here if neither you nor your spouse were employed during the past year.

	Employer Name and Address	Job title and duties of your position
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/>	1. State of West Virginia 1900 Kanawha Blvd E. Charleston, WV	Secretary of State
self <input checked="" type="checkbox"/> spouse <input checked="" type="checkbox"/>	2. Wells Media Group LLC 303 Washington St. W, Suite 204, Chas	Owner/Member
self <input type="checkbox"/> spouse <input checked="" type="checkbox"/>	3. State of West Virginia 1900 Kanawha Blvd E. Charleston, WV	State Senator
self <input type="checkbox"/> spouse <input checked="" type="checkbox"/>	4. U.S. Navy	Public Affairs Officer

6. 20% Gross Income Categories for you and your spouse

Did you or your spouse receive more than 20% of your gross income during the past calendar year from any one or more of the categories listed below? Yes ☒ No ☐ If yes, mark with an 'X' all categories that apply to you and/or your spouse.

self	spouse	self	spouse	self	spouse
COMPANIES		MINING		GOVERNMENT	
<input type="checkbox"/>	<input type="checkbox"/> Advertising	<input type="checkbox"/>	<input type="checkbox"/> Surface mining	<input type="checkbox"/>	<input type="checkbox"/> City or town
<input type="checkbox"/>	<input type="checkbox"/> Beer, wine or liquor (or distributor)	<input type="checkbox"/>	<input type="checkbox"/> Mining equipment	<input type="checkbox"/>	<input type="checkbox"/> County
<input type="checkbox"/>	<input type="checkbox"/> Cable television	<input type="checkbox"/>	<input type="checkbox"/> Deep mining	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> State
<input type="checkbox"/>	<input type="checkbox"/> Chemical	OIL OR GAS		ASSOCIATIONS OR ORGANIZATIONS	
<input type="checkbox"/>	<input type="checkbox"/> Construction	<input type="checkbox"/>	<input type="checkbox"/> Retail	<input type="checkbox"/>	<input type="checkbox"/> Labor Association/Organization
<input type="checkbox"/>	<input type="checkbox"/> Insurance	<input type="checkbox"/>	<input type="checkbox"/> Wholesale	<input type="checkbox"/>	<input type="checkbox"/> Professional Association
<input type="checkbox"/>	<input type="checkbox"/> Intrastate transportation	<input type="checkbox"/>	<input type="checkbox"/> Exploration	<input type="checkbox"/>	<input type="checkbox"/> Association that promotes gaming or lottery
<input type="checkbox"/>	<input type="checkbox"/> Interstate transportation	<input type="checkbox"/>	<input type="checkbox"/> Production & Drilling	<input type="checkbox"/>	<input type="checkbox"/> Association of public employees or public officials
<input type="checkbox"/>	<input checked="" type="checkbox"/> Media	UTILITIES		<input type="checkbox"/>	<input type="checkbox"/> Trade Association or Organization
<input type="checkbox"/>	<input type="checkbox"/> Manufacturing	<input type="checkbox"/>	<input type="checkbox"/> Electric	OTHER	
<input type="checkbox"/>	<input type="checkbox"/> Promotional	<input type="checkbox"/>	<input type="checkbox"/> Gas	<input type="checkbox"/>	<input type="checkbox"/> Economic Development
<input type="checkbox"/>	<input type="checkbox"/> Race tracks	<input type="checkbox"/>	<input type="checkbox"/> Telephone	<input type="checkbox"/>	<input type="checkbox"/> Hospitals or other health care providers
<input type="checkbox"/>	<input type="checkbox"/> Recreation	<input type="checkbox"/>	<input type="checkbox"/> Water	<input type="checkbox"/>	<input type="checkbox"/> Information Technology
<input type="checkbox"/>	<input type="checkbox"/> Retail	FINANCIAL		<input type="checkbox"/>	<input type="checkbox"/> Legal service providers
<input type="checkbox"/>	<input type="checkbox"/> Timber	<input type="checkbox"/>	<input type="checkbox"/> Banks	<input type="checkbox"/>	<input type="checkbox"/> Lobbying
<input type="checkbox"/>	<input type="checkbox"/> Wholesale	<input type="checkbox"/>	<input type="checkbox"/> Savings and Loan Associations		
<input type="checkbox"/>	<input type="checkbox"/> Waste disposal	<input type="checkbox"/>	<input type="checkbox"/> Loan or Finance Companies		

Name: TennantNatalie**7. For-Profit Business**

List the name of each for-profit business on which either you or your spouse serves on the Board of Directors or as an Officer. Describe the type of business.

☒ Mark here if neither you nor your spouse serve on a Board of Directors or is an Officer of a for-profit business.

Name and address of the Business	Description of the Business
self <input checked="" type="checkbox"/> spouse <input checked="" type="checkbox"/> Wells Media Group LLC 303 Washington Street W., Suite 204 Charleston	Media Consulting
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Hewlett Packard Palo Alto, CA	Non-paid Public Sector Board of Advisor See attached Ethics Opinion
self <input type="checkbox"/> spouse <input type="checkbox"/>	

8. Non-Profit Organization

List the name of each non-profit organization on which either you or your spouse serves on the Board of Directors or as an Officer.

☐ Mark here if neither you nor your spouse serve on a Board of Directors or is an Officer of a non-profit.

Name and address of the Organization	Description of the non-profit
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> American Heart Association 126 Court Street, Charleston WV 25301	Heart/Stroke Advocacy organization
self <input type="checkbox"/> spouse <input type="checkbox"/>	
self <input type="checkbox"/> spouse <input type="checkbox"/>	

9. Sales or Contracts with State, County or Local Government

During the past calendar year, did you or your spouse have any sales or contracts with any unit of state, county, or local government? Yes _____ No ☒ Sales or contracts for goods or services may be either direct or through a partnership, corporation or association in which either you or your spouse owned or controlled more than (10%) ten percent. If yes, identify the government agency that purchased the goods or services, and describe the nature of the goods or services. (See the instruction sheet for more information about the Ethics Act's prohibition against having an interest in a public contract.) W. Va. Code § 6B-2-5(d)

Name of Government organization	Description of goods or services provided
self spouse <input checked="" type="checkbox"/> Example: State of WV DHHR	Foster home placement studies
self <input checked="" type="checkbox"/> spouse Example: Clay County Sheriff's Department	Rental of garage space for patrol cars
self <input type="checkbox"/> spouse <input type="checkbox"/>	
self <input type="checkbox"/> spouse <input type="checkbox"/>	
self <input type="checkbox"/> spouse <input type="checkbox"/>	

10. Adult Children – Public Employment

List the name and business address of any adult child or step-child employed by any unit of state, county or local Government.

☒ Mark here if this question does not apply to you.

Name of child or step-child	Business address

Name: Tennant

Natalie

11. DEBTS

A: Owed to others: List the names of all persons residing or transacting business in the state who you owe, in the aggregate, more than \$5,000, on the date of this statement. Include debts you owe in the name of any other person and debts on which you are a cosigner.

You **DO NOT** have to report:

1. Debts to immediate family members, parents, or grandparents
2. Home mortgages for your primary and secondary residences
3. Loans for autos maintained for the use of your immediate family
4. Student loans
5. Debts resulting from the ordinary conduct of your business, profession or occupation
6. Debts to a financial institution or to a credit card company

HOWEVER, if any debt over \$5,000 exempted above required the approval of the state or any of its political subdivisions, or if a loan was obtained from the "Linked Deposit Program" (W.Va. Code §12-1A-1 et seq.), you must list the debt.

☐ Mark here if you owe no debts as described above.

B. Owed to you: List the names of all persons residing or transacting business in the state who owe you, in the aggregate, more than \$5,000, on the date of this statement, either in your name or any other person's name for your use or benefit.

You **DO NOT** have to report:

1. Debts from immediate family members, parents, or grandparents
2. Debts resulting from the ordinary conduct of your business, profession or occupation
3. Demand or saving accounts in banks, savings and loan associations, or other similar depositories
4. Loans by you to any business in which you have an ownership interest

☐ Mark here if you had no debts owed to you as described above.

12. GIFTS

A **gift** is anything with monetary value, including meals and beverages. If you, your spouse, and/or any of your dependents received one or more gifts whose total value is over one hundred dollars (\$100) from a person, business, or organization who has a direct and immediate interest in a governmental activity over which you have control, then list the name of each giver UNLESS it falls into one of the exceptions listed below. "Total value" includes the cumulative fair market value of all gifts from the same source directly or indirectly, during the previous calendar year.

Gifts from the following sources are **NOT** reported.

1. your spouse, child, grandchild, parents or grandparents
2. a trust established by your spouse, child, grandchild, or ancestor
3. a will, or lawful inheritance in the absence of a will
4. a registered lobbyist (*registered lobbyists report these expenditures on Lobbyist Schedule A Reporting Form*)

☐ Mark here if you received no gifts as described above.

Name: Tennant

Natalie

This page applies to questions 13 and 14 on the next page.

**** If you are an elected official, candidate, state or higher education employee, you do not need to complete this page. Please continue to page 7 and answer questions 13 and 14 about you and your spouse.**

**** All other filers:** If you are appointed to serve on a State Board, Agency or Commission by the Governor and receive no compensation for your service, you may not be required to report certain financial information about your spouse. Complete Worksheet A to determine if the spousal exemption applies.

Worksheet A (for questions 13 and 14)

Part 1. Are you a Board, Agency or Commission Member appointed by the Governor?

YES ☐ Continue to part 2

NO ☒ **DO NOT** complete parts 2 or 3 on this page. Continue to questions 13 and 14 on the next page and answer the questions for both you and your spouse.

Part 2. Do you hold another office or employment position that requires you to file this Financial Disclosure Statement?

YES ☐ **DO NOT** complete part 3 of this page. Continue to questions 13 and 14 on the next page and answer the questions for both you and your spouse.

NO ☐ Continue to part 3.

Part 3. Complete this section to determine if you are exempt from disclosing certain financial information about your spouse in questions 13 and 14 on the next page.

List the name of the state Board, Commission or Agency of which you are an appointed member:

Mark with an "X" each box that applies:

1. ☐ There is no compensation, per diem, salary or other payment authorized by state law for serving on this board or commission. (Excluding travel or expense reimbursement) Note: The test is not whether you decline compensation but whether it is authorized by code, statute, or law.
2. ☐ Neither my spouse nor a business with which he or she is associated is regulated by the State Board, Commission, or Agency on which I serve by appointment. ("Associated" is defined as a business in which your spouse, or his or her immediate family member, is a director, officer, owner, employee, compensated agent, or holder of stock which constitutes five percent or more of the total outstanding stocks of any class. "Immediate family member" means dependent children, grandchildren or parents.)
3. ☐ Neither my spouse nor a business with which he or she is associated has a contract with, or receives any grants or appropriations from, the state Board, Commission, or Agency on which I (the filer) serve.

➔ If you have checked all three boxes, then answer questions 13 and 14 on the next page as they pertain only to you.

➔ If not, then answer all questions as they pertain to both you and your spouse.

➔ Verification & Signature:

Under penalty of perjury, I hereby declare that the information provided herein is true.

Signature of Filer: Natalie E. Tennant

Print Filer Name: Natalie E. Tennant

Date: 1/31/2014

Name: Tennant

Natalie

You must answer all questions on this page.**13. ALL Sources of Income over \$1,000 including Employment - (To determine if you must disclose income information about your spouse, refer to Worksheet A.)**

- List every source or category of income or employment over \$1,000 received by you and/or your spouse during the preceding calendar year in your name, or by any other person for your use or benefit. Include employment even if listed elsewhere on this statement.
- Include distributions received from retirement and pension accounts.
- Do not list specific names of clients or customers. *For example*, if you are a lawyer or an insurance agent, do not list the names of your clients.
- Do not disclose actual dollar amounts of income, only the source. See examples below.

Indicate if the income was received by you or your spouse by marking the appropriate box in the chart below.

Category of income over \$1000		Description (or job title)
self <input checked="" type="checkbox"/> spouse	Example: Social Security	US Government
self <input checked="" type="checkbox"/> spouse <input checked="" type="checkbox"/>	Example: Sold Real Estate	Sold residence in Beckley
self <input checked="" type="checkbox"/> spouse	Example: Farming/Timber	Sold timber from my farm
self spouse <input checked="" type="checkbox"/>	Example: Employment	Teacher, Mingo county schools
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/>	State of West Virginia	Secretary of State
self <input type="checkbox"/> spouse <input checked="" type="checkbox"/>	State of West Virginia <input checked="" type="checkbox"/>	State Senate <input checked="" type="checkbox"/>
self <input type="checkbox"/> spouse <input checked="" type="checkbox"/>	United States Navy <input checked="" type="checkbox"/>	Public Affairs Officer <input checked="" type="checkbox"/>
self <input checked="" type="checkbox"/> spouse <input checked="" type="checkbox"/>	Wells Media Group LLC <input checked="" type="checkbox"/>	Owner/Member
self <input type="checkbox"/> spouse <input type="checkbox"/>		
self <input type="checkbox"/> spouse <input type="checkbox"/>		

14. Business and/or Property Interests - (To determine if you must disclose business or property interests of your spouse, refer to Worksheet A.)

List the name and address of each business in which, during the past calendar year, you or your spouse held an interest with a fair market value of \$10,000 or more, including but not limited to: non-publicly owned businesses, publicly or privately traded stocks, bonds or securities, including those held in self-directed retirement accounts; and commercial real estate. (For purposes of this question, DO NOT include mutual funds or specific holdings in mutual funds or retirement accounts. However, distributions from retirement accounts must be reported in question 13 if over \$1,000 annually.

Attach additional sheets if necessary.

☐ Mark here if neither you nor your spouse had any interest in a business or real estate as described above.

self spouse <input checked="" type="checkbox"/>	Example: Jones Coal Hauling, 123 Main Street, Placeville WV
self <input checked="" type="checkbox"/> spouse	Example: Stonefront Apartment Building, 123 Main Street, Charleston WV 25312
self <input checked="" type="checkbox"/> spouse <input checked="" type="checkbox"/>	Example: Acme Bank Stock, 788 Water Street, Cincinnati OH 34343
self <input checked="" type="checkbox"/> spouse <input checked="" type="checkbox"/>	Wells Media Group LLC
	303 Washington Street West, Suite 204, Charleston WV 25302
self <input type="checkbox"/> spouse <input type="checkbox"/>	
self <input type="checkbox"/> spouse <input type="checkbox"/>	



STATE OF WEST VIRGINIA
WEST VIRGINIA ETHICS COMMISSION
210 BROOKS STREET, SUITE 300
CHARLESTON, WEST VIRGINIA 25301-1804
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ethics@wv.gov • www.wvethicscommission.org

September 28, 2011

VIA US Mail and Email

Ashley Summitt
Counsel
Office of the Secretary of State
Building 1, Suite 157-K
1900 Kanawha Blvd. East
Charleston, WV 25305

Dear Ashley:

This letter is in response to your letter dated September 27, 2011 and in accordance with the telephone advice I previously rendered to you.

You state that Secretary Tennant has been asked to serve on the Hewlett Packard (HP) Public Sector Board of Advisors. The informational flyer provided by HP states in relevant part:

The HP Board of advisors is a *working*, as opposed to an *honorary*, body. In return for each member's investment of time and insight, serving on the Board is intended to provide reciprocal intellectual value and professional networking opportunities.

Additionally, you state in your letter "the Secretary of State, through membership on this working board, will have an opportunity to collaborate and share ideas, knowledge and experience with a group of public sector peers and apply the solutions learned to the West Virginia SOS office, perhaps utilizing the opportunity to pilot new technologies. "

For service on the Board, Secretary Tennant will receive no compensation. The Advisory Council Membership agreement states that she is required to put forth her best effort to attend two one day meetings per year. For attending these meetings, HP pays for the participants lodging, local ground transportation and meals.

It is my understanding that the Secretary of State's Office has no bids or proposals for services for which HP is competing. You state that in the past the office has purchased printers and fifteen tablets, i.e. technology used for poll books, from HP. The cost for each tablet was approximately \$800.00. Your office contracts with HP for the continued maintenance of this equipment.

Please be advised that in my opinion it does not violate the West Virginia Ethics Act for Secretary Tennant to serve on this board so long as:

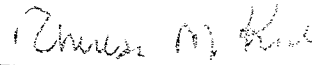
1. HP is not currently submitting a bid or proposal to the SOS for a contract. (If HP seeks to be awarded a contract during Secretary Tennant's tenure on the Board then please contact us for further advice as the question of whether her continued service is permissible may require a formal advisory opinion);
2. The Secretary does not endorse HP, its products or services;
3. The Secretary only accepts reasonable travel expenses; not gifts prohibited by the Ethics Act; and,
4. The overriding benefit of service on the Board is to the Secretary in her official capacity and to the State of West Virginia. In making this determination, your office should apply the five part balancing test in W.Va. C.S.R. § 158-7-3 which is:
 - a. Attendance by the public official or employee must fulfill an existing agency need by significantly enhancing the attendee's occupational skill or knowledge to provide important information needed by the agency to meet its official mandate;
 - b. The seminar or conference must be appropriate for the proposed attendee. A trip is appropriate for the attendee if he or she will use the information or job skill enhancement and is the person most suitable to acquire and transfer the skills or information to other appropriate agency personnel;
 - c. The site of the proposed trip must be appropriate. A public employee or official may not accept payment for attendance at the seminar or conference and related costs if the same information is readily available locally;
 - d. The seminar or conference must offer a reasonable return on the time spent. Attendance at the seminar or conference should represent a reasonable investment of the public official or employee's time when weighed against the information acquired or the degree of improvement in job skills or knowledge; and
 - e. The benefit to the agency must be significantly greater than the incidental benefit to the traveler.

Last, HP sets forth that it provides attendees with an estimate of the monetary value of the lodging and other costs which it covers. When the Secretary files her 2012

Financial Disclosure Statement, she should disclose that she received some of her travel costs from HP for this event.

In closing, under the circumstances outlined above, Secretary Tennant may serve on the HP Advisory Board and may allow HP to cover the costs set forth in the Council Membership Agreement, i.e. lodging, local ground transportation and meals. Please let us know if you require anything further.

Very truly yours,

A handwritten signature in dark ink, appearing to read "Theresa M. Kirk".

Theresa M. Kirk
Executive Director